Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. U.S. Palent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Substitute for Form PTO-875 Application or gorseystumber CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN FOR OR NUMBER FILED SMALL ENTITY BASIC FEE NUMBER EXTRA (37 CFR 1.16(a)) RATE FEE TOTAL CLAIMS RATE (3) CFR 1.16(c)) FEE INDEPENDENT CLAIMS minus 20 = OR OR minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT OR (37 CFR 1,16(d)) If the difference in column 1 is less than zero, enter "O" in column 2 0R TOTAL CLAIMS AS AMENDED - PART II OR TOTAL (Column 1) (Calumn 2) (Column 3) CLAIMS SMALL ENTITY OR OTHER THAN HIGHEST REMAINING SMALL ENTITY NUMBER PRESENT AFTER PREVIOUSLY RATE AMENDMENT EXTRA ADDI. Total (37 CFR 1.16(c)) PAID FOR RATE TIONAL ADDI. Minus FEE TIONAL Independent (37 CFR 1.16(b)) FEE Minus x s 50. OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) x s/00. 200 OR +1/80= +:360-OR TOTAL ADD'L FEE TOTAL Cρ ADD L FEE (Calumn 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER AFTER PRESENT AMENDMENT PREVIOUSLY RATE EXTRA ADDI-Total (2) CFR 1.16(c)) PAID FOR RATE TIONAL ADDI. END Minus FEE TIONAL independent p) cfR (.16(b)) x : <u>Z5</u> = FEE x 150 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) x \$ 100= x 3200 OR :*180*= OR + 340. TOTAL ADD'L FEE TOTAL (Column 1) OR (Column 2) ADD'L FEE (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT AFTER AMENDMENT PREVIOUSLY RATE EXTRA ADDI-Total (3) CFR (.15(c)) PAID FOR RATE TIONAL ADDI-Minus 9 FEE TIONAL independent (37 CFR 1.16(b)) FEE ũ x : 25 = Minus OR x : 50 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 100= OR +1/80= 340

* If the entry in column 1 is less than the entry in columnit?; write "O' in column 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or relain a benefit by the public which is to fite (and by the Induding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this birden, should be sent to the Chief Information of commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADD'L FEE

OR ADD'L FEE**

If the "Highest Number Previously Paid For" (Total or Indiana Table Ta

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.